

Finavon Court Care Home Service

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Glenrothes
KY7 4UG

Telephone: 01592 773033

Type of inspection: Unannounced
Inspection completed on: 7 March 2017

Service provided by:
Bield Housing & Care

Service provider number:
SP2004005874

Care service number:
CS2003006887

About the service

Finavon Court is a purpose built home providing 24 hour care for a maximum of 24 older people. The provider is Bield Housing and Care. At this inspection, 20 people were resident in the home.

The home consists of two houses each providing accommodation in single bedsit-lets, which have a small kitchen area where the tenant can make light snacks or prepare a hot drink. Each house has a sitting/dining room. There are also communal bathrooms, central laundry and kitchen. There is one sun lounge and a hairdressing salon (previously used as a sun lounge). The home is surrounded by pleasant, landscaped gardens with seated areas for people living in the home and their relatives to use.

The aim of the service is to provide 'personal care and daily support in a well designed domestic type environment' encouraging people living in the home to 'maintain ordinary, daily living skills with support available as required or requested'.

What people told us

During the inspection we spoke with three people using the service and one relative, on an individual basis. Throughout the inspection we chatted with people living in the home on an informal basis and observed interactions between people using the service and staff. People looked relaxed and well cared for.

Everyone spoken with was satisfied with the care provided. One person, who had difficulty using the telephone, told us how staff had arranged for her to speak with her daughter on face time, which had been a great success.

A visiting relative commented on improvements in the service in recent months. Staff were said to be more together as a team and were more knowledgeable about her mother's needs. Communication with the family had also improved. These improvements had resulted in her mother looking happier now.

Self assessment

Services undertake a self-assessment before an inspection. The self-assessment details strengths, areas for improvement and grades the service has awarded itself based on its performance under quality indicators.

The inspector reviews this before inspection and reviews some of the evidence that the provider says they have to evidence their performance.

The Care Inspectorate received a completed self-assessment document from the service. The provider identified what it thought the service did well, areas for development and any changes it had planned. We discussed how to improve the information provided in the self-assessment in order to show how the areas of strength had improved the outcomes for residents.

From this inspection we graded this service as:

Quality of care and support	3 - Adequate
Quality of environment	3 - Adequate
Quality of staffing	3 - Adequate

Quality of management and leadership

3 - Adequate

What the service does well

We found all areas of the home were clean and comfortable.

Each person living in Finavon Court had a personal file which recorded their needs and how staff should meet these needs. In the personal files examined we saw that care plans had recently been reviewed and updated. There was lots of good detail about each individual, ensuring that staff had clear guidance on how to provide their care. During the inspection we saw several examples of staff following the guidance in care plans. A copy of the care plan was kept in the service user's room. This meant all staff had quick access to this information while providing care and the care plan was also available to the service user and their representatives. A relative commented that staff now seemed more knowledgeable about her mother's care needs.

We saw that staff had received regular training and we saw examples of how staff used this to improve their practice. Staff told us communication systems had improved; there was more guidance and support from management and areas of responsibility were now clearer. As a result all staff spoken with said that staff morale had improved; staff were now working better as a team and were more confident to put forward their ideas for improving the service. All staff were encouraged to get involved in improving service users' quality of life in the home for example, domestic staff were encouraged to socialise with residents while cleaning, the cook now attended the morning handover meeting.

Since the last inspection the number and variety of activities offered had improved. We saw people who used the service enjoying an exercise class during the visit.

What the service could do better

We found that one care plan had not been updated to reflect a change in medical needs. Management, kitchen and care staff spoken with knew the changes had been made but the relevant records had not been updated.

When care plans were reviewed there was no clear evaluation recorded in the care plan. The evaluation should clearly show what the outcome was for the person and whether the care provided was successful in meeting the person's needs or if further changes were needed.

The service uses a computer system to record care plans and evaluations. Not all staff were confident to use the computer system or sometimes they were not able to go on the computer at the time the changes were made. Also the food and fluid records we looked at were not formally evaluated each day. The amount taken was well recorded but there was no evaluation of this information to make sure people were taking enough on a daily basis to improve their health. (See recommendation 1).

Staff files and discussions with staff confirmed that staff supervision and observation of staff practice was taking place more often. We saw from records that this had encouraged staff to look at how they could improve care. The service needs to develop systems which ensure all staff receive regular supervision and that reflective practice is used routinely after training and when practice is observed, to evidence staff competency. (See recommendation 2).

The service still needs to make improvements to their systems for checking the quality of the service (quality assurance systems) and for involving people who use the service in assessing the quality of all aspects of the service. (See requirement 1 and recommendation 3 below).

The service needs to make sure there are enough staff on duty each day to meet the needs of service users. (See recommendation 4).

Requirements

Number of requirements: 1

1. The provider must develop their quality assurance systems to make sure the identified areas for improvement are acted on and outcomes. To achieve this the provider must ensure:

- action plans clearly identify who is responsible for taking the action forward, with timescales.
- the system includes regularly reviewing the action plan to monitor progress.
- the date of completion and outcomes are clearly recorded.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011, Scottish Statutory Instrument 2011/210: Regulation 4 - welfare of service users.

Timescale: Within 4 weeks of receipt of the draft report.

Recommendations

Number of recommendations: 4

1. It is recommended that care plans are reviewed and updated at the time of any assessed change in need. The care plan should clearly record effective evaluation of the care provided and the outcomes for the person using the service.

Tools used to monitor and record health and wellbeing needs, such as food and fluid monitoring charts, should also be regularly evaluated. The outcomes and action taken should be recorded in the care plan.

This is with reference to: National Care Standards Care Homes for Older People, Standard 6 - Support Arrangements and Standard 14- Keeping Well- healthcare.

2. To evidence staff competency and on going professional development, the service needs to develop systems which ensure all staff receive regular supervision and that reflective practice is used routinely following training and observation of practice.

This is with reference to: National Care Standards Care Homes for Older People, Standard 5: Management and Staffing Arrangements.

3. The service should continue to improve systems for involving service users, relatives and other stakeholders in the evaluation and development of the service. This should cover all aspects of the service including quality of care, environment, staffing and management and leadership.

This is with reference to: National Care Standards Care Homes for Older People, Standard 5: Management and Staffing Arrangements.

4. The document used to assess service users' dependency needs and the staffing levels should be reviewed. It must evidence accurate recording and evaluation of people's physical, social, recreational and psychological needs.

Specific consideration must be given to people with a dementia diagnosis or cognitive impairment.

In addition to direct care needs the assessment must also consider the physical layout of the building, staff training and staff supervision needs as referred to in Records all Services (excluding Child Minders) Must Keep and Notification Reporting Guidance' (on the Care Inspectorate website www.careinspectorate.com).

Reference is made to: The National Care Standards - Care Home for Older People: Standard 5 Management and Staffing.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Inspection and grading history

Date	Type	Gradings	
19 Sep 2016	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
21 Mar 2016	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
10 Nov 2015	Unannounced	Care and support	2 - Weak
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	2 - Weak
19 Feb 2015	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
19 Aug 2014	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	4 - Good

Date	Type	Gradings	
		Management and leadership	3 - Adequate
27 Jan 2014	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
23 Sep 2013	Unannounced	Care and support	3 - Adequate
		Environment	2 - Weak
		Staffing	3 - Adequate
		Management and leadership	Not assessed
11 Mar 2013	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	4 - Good
3 Oct 2012	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
20 Aug 2012	Re-grade	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
26 Jan 2012	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
8 Jul 2011	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	Not assessed
		Management and leadership	4 - Good
24 Nov 2010	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed

Date	Type	Gradings	
		Management and leadership	3 - Adequate
9 Jun 2010	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
10 Mar 2010	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	3 - Adequate
2 Jul 2009	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate
17 Feb 2009	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
4 Sep 2008	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good

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